



# 2026 TAP NATIONALS - Harrah's Atlantic City 8 Ball Singles Registration

Singles events are a 1st come, 1st served event.

No entries will be accepted after **Sept. 14th** or event fills up, whichever comes first.

Fee for singles is \$125 per player. All checks should be submitted with this form, made payable to:

**TAP, LLC and sent to P.O. Box 5 Round Hill, VA 20142.**

Please email any questions to [nationalchanges@tapleague.com](mailto:nationalchanges@tapleague.com)

Registrations/DQs are **NON-REFUNDABLE**, but can be transferred **prior to deadline**. Receipt of form and payment by the deadline is the guarantee of a spot, unless all spots have been filled at time of receipt.

**PLAYERS MUST HAVE A CURRENT TAP MEMBERSHIP DATE ON PHONE APP OR WITH THEM, OTHERWISE THEY WILL NOT BE ABLE TO PLAY. ID WILL BE VERIFIED BY THE OPPONENTS IN YOUR EVENT.**

Singles events are **Round Robin to Single Elimination**. Players must have 6 matches played in **weekly league play** from **Apr. 27 - Sept. 14** as well as **10 lifetime matches**. Players must meet all National Requirements, see rule book. Once Tournament HC is determined, player will be put in the correct bracket.

**8 BALL SINGLES WILL START THURSDAY, OCT. 15 @ 10 PM AND FINISH ON SUNDAY OCT. 18.**  
**After HC audit has been ran and adjusted, the Round Robin starts date and time for your specific HC will be announced.**

LICENSEE/OPERATOR NAME:	Brandi Balza & Nick Petronio	TERRITORY ID:	228
TERRITORY/LEAGUE NAME:	Three Rivers TAP	STATE/PROV.	PA

PLAYER NAME:
PLAYER EMAIL:
PLAYER PHONE:

MEMBER / PLAYER ID #:	HANDICAP LEVEL:
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## 8 BALL SINGLES HANDICAP (CIRCLE ONE)

HANDICAP                  HANDICAP                  HANDICAP                  HANDICAP                  HANDICAP                  HANDICAP  
2/3                                  4                                  5                                  6                                  7                                  8

**ARE YOU ON A DREAM TEAM ALSO? (CIRCLE ONE)    NO TEAM    ONE TEAM    TWO TEAMS**

If YES, list the Dream Team name(s) below

DREAM TEAM 1:
DREAM TEAM 2:

All information on this form must be completed. Failure to do so could delay processing.